

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Paxton Scott

Mailing Address 330 Seven Springs Way

City State Zip Code
Brentwood TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

LifePoint Health

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2015

Transaction ID : SA11AI.9516

Amount of Each Receipt this Period

343.75

Full Name (Last, First, Middle Initial)

B. Scott Smith

Mailing Address 1007 Woodview Court

City State Zip Code
Morgan City LA 70380

FEC ID number of contributing
federal political committee.

C

Name of Employer

Teche Regional

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2015

Transaction ID : SA11AI.9543

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Tracie Stratton

Mailing Address 330 Seven Springs Way

City State Zip Code
Brentwood TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

LifePoint Health

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 14 / 2015

Transaction ID : SA11AI.9501

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1743.75